

GP

PROP 92

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Late Contribution Report

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Amounts may be rounded to whole dollars.

CA 1305777

LATE CONTRIBUTION REPORT

NAME OF FILER
Association of California Life and Health Insurance Companies PAC

AREA CODE/PHONE NUMBER

916-442-2280

I.D. NUMBER (if applicable)

761012

STREET ADDRESS

CITY

Sacramento, CA 95814

STATE

ZIP CODE

Date of This Filing 01/24/2008

Date Stamp

Report No.

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SF
JAN 24 2008

☐ Amendment to Report No. (explain below)

No. of Pages 1

DEBRA BOWEN
Secretary of State

CALIFORNIA FORM

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Late Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
01/24/2008	Californians for Fair Education Funding/No on 92 (#1301493) Mill Valley, CA 94941	Community Colleges. Funding. Proposition 92 Statewide	2,500.00	02/05/2008

Reason for Amendment

3092 KAH

6P

Prop 92

1 of 2

Late Contribution Report

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LATE CONTRIBUTION REPORT

NAME OF FILER Faculty Association of California Community Colleges-PAC			Date of This Filing 01/24/2008	RECEIVED AND FILED in the office of the Secretary of State of California JAN 24 2008 DEBRA BOWEN Secretary of State 1/2	CALIFORNIA FORM 497 For Official Use Only R
AREA CODE/PHONE NUMBER (916) 447-8555	I.D. NUMBER (if applicable) 841118		Report No. LCM-80123		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95811	No. of Pages 2		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/10/2008 	Santa Monica Community College District 1900 Pico Blvd. Santa Monica CA 90405-1644 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		276.50
01/23/2008 	FACCC (Faculty Association of California Community Colleges) 1823 11th Street Sacramento CA 95814 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5324.78
01/23/2008 	FACCC (Faculty Association of California Community Colleges) 1823 11th Street Sacramento CA 95814 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		70000.00

*Contributor Codes

IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

(THU) JAN 24 2008 10:47/ST. 10:46/No. 7500000820 P 2

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER
Faculty Association of California Community Colleges-PAC

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

841118

STREET ADDRESS

CITY

STATE

ZIP CODE

Date of
This Filing

Report No.

☐ Amendment
to Report No. _____
(explain below)

No. of Pages

RECEIVED AND FILED LATE CONTRIBUTION REPORT

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FORM 497

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DEBRA BOWEN
Secretary of State

2 / 2

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
01/23/2008 	Californians for Improving Community Colleges Los Angeles CA 90004 ID: 1282453 Ref: <input type="checkbox"/>	Statewide Ballot: 92 Dist:	100000.00	
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		

Reason for Amendment: _____